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TRANSMITTAL LETTER T DESIGNATED/ELECTED		DESIGNATED/FLECTE	TO THE UNITED STATES  OFFICE (DO/EO/US)	Attorney Docket No. 2508-1019	
CONCERNING A FILING UNDER 35 U.S.C. 371			U.S. 407517389		
INTERNATIONAL APPLN. NO. INTERNATIONAL FILING DATE PR				PRIORITY DATE CLAIMED	
PCT/IT03/00203 April 3, 2003 June 10, 2002					
TITLE OF INVENTION: A MODULAR SYSTEM FOR REALIZING MOBILE MEANS OR STATIC MACHINES OPERATED BY HUMAN MUSCULAR STRENGTH					
APPLICANT(S) FOR DO/EO/US: Gianpietro SOLINAS					
Applicant herewith submits to the United States Designated Elected Office (DO/EO/US) the following items and other information:					
1.		☑ This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. 371.			
2.		This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.			
3.	_	This is an express request to begin national examination procedures (35 U.S.C. 371(f)).			
5.	23	The submission must include items (5), (6), (9) and (21) indicated below.			
4.	$\boxtimes$				
5.	$\boxtimes$				
٦.	a.				
	b.	has been communicated by the International Bureau. See attached PCT/IB/308.			
	C.	is not required, as the application was filed in the United States Receiving Office (RO/US).			
6.	С. П				
"	a.				
	b.				
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	a.				
	b.	have been communicated by the International Bureau.			
	C.	have not been made, however, the time limit for making such amendments has NOT expired.			
	d.	have not been made and will not be made.			
8.		T			
9.	$\Box$				
1		Declaration of Inventorship for purposes of U.S.A. designation pursuant to rule 4.17(iv).			
		An English language translation of the annexes of the International Preliminary Examination Report			
	under PCT Article 36 (35 U.S.C. 371(c)(5)).				
Items 11 to 20 below concern document(s) or information included:					
12		Information Disclosure Statement (IDS) w/PTO-1449 -  Copy of IDS citations.			
13		Assignment Papers (cover sheet & document(s)).			
14		A preliminary amendment.			
15	$\boxtimes$	An Application Data Sheet under 37 C.F.R. 1.76.			
16		Itemized Return Receipt Postcard			
17		A substitute specification.			
18		Power of Attorney and Statement under 37 CFR §3.73(b)			
	a.   Newly executed Power of Attorney				
	b. A change of Power of Attorney and/or change of address letter.			er.	
19					
	and 37 CFR 1.821 - 1.825.				
20		A second copy of the published international application under 35 U.S.C. 154(d)(4).			

21. A second copy of the English language translation of the international application (35 U.S.C. 154(d)(4)).

22. Other items or information: International Preliminary Examination Report (PCT/IPEA/409), International Search Report (PCT/ISA/210), PCT/RO/101, Abstract of the Disclosure

DT09 Rec'd PCT/PTO U.S. APPLICATION INTERNATIONAL APPLN. NO. **CT**/IT03/00203 2508-1019  $\boxtimes$ Applicant claims small entity status. See 37 CFR 1.27. CALCULATIONS PTO USE ONLY  $\boxtimes$ The following fees are submitted: **PCT FEES - NATIONAL STAGE Large Entity Small Entity Fee Description** Fee Fee (\$) Fee (\$) Fee Code Code 2631 \$150.00 1631 300.00 150.00 Basic National Stage Fee \$250.00 1632 500.00 2632 250.00 National Stage Search Fee \$100.00 200.00 1633 2633 100.00 National Stage Examination Fee Surcharge of \$130.00 for furnishing the oath or declaration later than 
☐ 20- ☐ 30 \$0.00 months from the earliest claimed priority date (Fee Code 1617/2617) SIZE FEE Fee From Plant size fee each **Additional Sheets Below** additional 50 sheets in \$0.00 - 100 = X \$250.00 excess of 100 50 Fee Code 1681/2681 **CLAIMS** NUMBER FILED NUMBER EXTRA RATE 1 - 3 = x \$200.00 0 Independent Claims Fee Codes 1614 / 2614 \$0.00 **Total Claims** 10 - 20 =Fee Codes 1615 / 2615 0 x \$50.00 \$0.00 MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 + \$360.00 \$0.00 Processing fee of \$130.00 for furnishing the English translation later than 20 months from the earliest claimed priority date (37 CFR 1.492(f)). Fee Code 1618 \$0.00 Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property \$0.00 **TOTAL FEES ENCLOSED** = \$ 500.00 Amount to be \$ refunded: Charged: \$  $\boxtimes$ A check in the amount of \$ 500.00 to cover the above fees is attached.  $\Box$ The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. A duplicate copy of this sheet is enclosed.  $\boxtimes$ The Director is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fee required under 37 C.F.R. §§ 1.16 or 1.17. SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON

YOUNG & THOMPSON 745 South 23<sup>rd</sup> Street Arlington, VA 22202

Telephone: (703) 521-2297 Facsimile: (703) 685-0573

Y&T Customer No. **00466** BC/ia

Benoit Castel, Reg. No. 35,041

NAME, REGISTRATION NUMBER

December 10, 2004

DATE